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PTO/SB/97 (08-01)

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on February 6, 2006
Date


Signature

J. Matthew Zigmant

Typed or printed name of person signing Certificate

In re: application of: Yan Chong

Application Number: 10/037,861

Filed: 01/02/2002

Title: SELF-COMPENSATING DELAY CHAIN FOR MULTIPLE-DATE-RATE
INTERFACESAtty Docket Number: 015114-054810US JMZ/ssb

Being faxed to Examiner – **Vincent T. Tran**, Group 2115 at facsimile number
1-571 273-8300 are the following documents:

1. This PTO/SB/97 Certificate of Transmission (1 page);
2. PTO/SB/21 Transmittal Form (1 page);
3. PTO/SB/17 Fee Transmittal (1 page submitted in duplicate);
4. PTO/SB/22 Petition for Extension of Time (1 page submitted in duplicate); and
5. Amendment (12 pages).

Number of pages being transmitted: 18

60696926 v1

FEB 06 2006

PTO/SB/21 (09-04)

TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

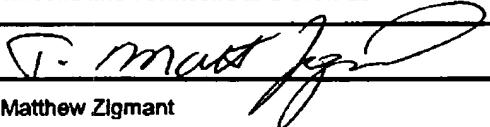
		Application Number	10/037,861
		Filing Date	January 2, 2002
		First Named Inventor	Chong, Yan
		Art Unit	2115
		Examiner Name	Vincent T. Tran
Total Number of Pages in This Submission	18	Attorney Docket Number	015114-054810US

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form (1 page submitted in duplicate) <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply (12 pages) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request (1 page submitted in duplicate) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): This Transmittal Form (1 page); and Fax Cover Sheet (1 page)
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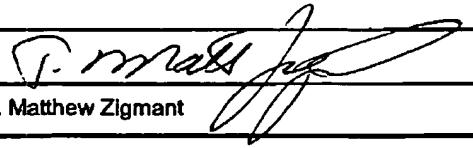
Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	J. Matthew Zigmant		
Date	February 6, 2006	Reg. No.	44,005

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, Fax No. 1-571-273-8300 on February 6, 2006.

Signature			
Typed or printed name	J. Matthew Zigmant	Date	February 6, 2006

60696911 v1

FEB 06 2006

PTO/SB/17 (12-04)

Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2006

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 700)

Complete If Known	
Application Number	10/037,861
Filing Date	January 2, 2002
First Named Inventor	Chong, Yan
Examiner Name	Vincent T. Tran
Art Unit	2115
Attorney Docket No.	015114-054810US

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____
 Deposit Account Deposit Account Number: 20-1430 Deposit Account Name: Townsend and Townsend and Crew LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments
 under 37 CFR 1.16 and 1.17

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES	
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Small Entity
Fee (\$)

50 25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

Fee (\$)

200 100

Multiple dependent claims

Fee (\$)

360 180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
43	-20 or HP = 10	x \$50	= \$500

HP = highest number of total claims paid for, if greater than 20

Multiple Dependent Claims	
Fee (\$)	Fee Paid (\$)

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
6	-3 or HP = 1	x \$200	= \$200

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. Sec 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

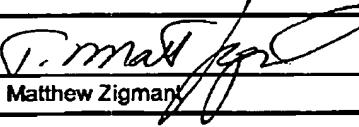
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number)	x	=

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: _____

Fee Paid (\$)

SUBMITTED BY		Registration No. (Attorney/Agent)	Telephone
Signature		44,005	415-576-0200
Name (Print/Type)	J. Matthew Zigman		Date February 6, 2006

60696918 v1

FEB 06 2006

PTO/SB/17 (12-04)

<p>Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</p> <p>FEE TRANSMITTAL For FY 2006</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>		<p>Complete If Known</p> <table border="1"> <tr> <td>Application Number</td> <td>10/037,861</td> </tr> <tr> <td>Filing Date</td> <td>January 2, 2002</td> </tr> <tr> <td>First Named Inventor</td> <td>Chong, Yan</td> </tr> <tr> <td>Examiner Name</td> <td>Vincent T. Tran</td> </tr> <tr> <td>Art Unit</td> <td>2115</td> </tr> <tr> <td>Attorney Docket No.</td> <td>015114-054810US</td> </tr> </table>		Application Number	10/037,861	Filing Date	January 2, 2002	First Named Inventor	Chong, Yan	Examiner Name	Vincent T. Tran	Art Unit	2115	Attorney Docket No.	015114-054810US
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TOTAL AMOUNT OF PAYMENT	(\$) 700														

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____
 Deposit Account Deposit Account Number: 20-1430 Deposit Account Name: Townsend and Townsend and Crew LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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	HP = highest number of independent claims paid for, if greater than 3					

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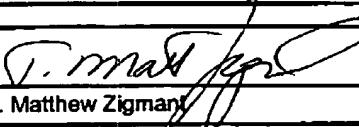
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Other: _____

SUBMITTED BY			
Signature			Registration No. (Attorney/Agent) 44,005
Name (Print/Type)	J. Matthew Zigman		Telephone 415-576-0200
		Date February 6, 2006	

60696918 v1